

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>	
A	This return/report is for: ☐ a multiemployer plan ☒ a single-employer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ an amended return/report ☐ the final return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ special extension (enter description) ☐ automatic extension ☐ the DFVC program
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan <u>BROADRIDGE FINANCIAL SOLUTIONS, INC. RETIREMENT SAVINGS PLAN</u>
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>BROADRIDGE FINANCIAL SOLUTIONS, INC.</u> <u>2 GATEWAY CENTER</u> <u>283 299 MARKET STREET</u> <u>NEWARK, NJ 07102</u>
1b	Three-digit plan number (PN) ▶ <u>001</u>
1c	Effective date of plan <u>04/01/2007</u>
2b	Employer Identification Number (EIN) <u>33-1151291</u>
2c	Plan Sponsor's telephone number <u>201-714-3000</u>
2d	Business code (see instructions) <u>541990</u>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2022	JEFFREY MOLIN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN	
5 Total number of participants at the beginning of the plan year		5	8119
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).			
a(1) Total number of active participants at the beginning of the plan year.....		6a(1)	6750
a(2) Total number of active participants at the end of the plan year		6a(2)	7209
b Retired or separated participants receiving benefits.....		6b	40
c Other retired or separated participants entitled to future benefits		6c	1604
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	8853
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	13
f Total. Add lines 6d and 6e		6f	8866
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	8650
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	633
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2K 2S 2T 3H			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2021
		This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan BROADRIDGE FINANCIAL SOLUTIONS, INC. RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BROADRIDGE FINANCIAL SOLUTIONS, INC.	D Employer Identification Number (EIN) 33-1151291	

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 64 65	RECORDKEEPER	477128	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

(a) Enter name and EIN or address (see instructions)

THE AYCO COMPANY, L.P.

13-4019460

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26	OTHER SERVICES	82750	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan <u>BROADRIDGE FINANCIAL SOLUTIONS, INC. RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BROADRIDGE FINANCIAL SOLUTIONS, INC.</u>	D Employer Identification Number (EIN) <u>33-1151291</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FIAM INX TD 2040 T</u>			
b Name of sponsor of entity listed in (a): <u>FIAM TRUST COMPANY</u>			
c EIN-PN <u>20-4659714-082</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>92302666</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FIAM INX TD 2055 T</u>			
b Name of sponsor of entity listed in (a): <u>FIAM TRUST COMPANY</u>			
c EIN-PN <u>20-4659714-112</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>21877838</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>SS S&P 500 INDEX K</u>			
b Name of sponsor of entity listed in (a): <u>STATE STREET BANK & TRUST COMPANY</u>			
c EIN-PN <u>90-0337987-388</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>328286444</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FIAM INX TD 2025 T</u>			
b Name of sponsor of entity listed in (a): <u>FIAM TRUST COMPANY</u>			
c EIN-PN <u>20-4659714-079</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>61261478</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FIAM INX TD 2060 T</u>			
b Name of sponsor of entity listed in (a): <u>FIAM TRUST COMPANY</u>			
c EIN-PN <u>20-4659714-146</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>9634308</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FIAM INX TD INCOME T</u>			
b Name of sponsor of entity listed in (a): <u>FIAM TRUST COMPANY</u>			
c EIN-PN <u>20-4659714-074</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>10724264</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FIAM INX TD 2020 T</u>			
b Name of sponsor of entity listed in (a): <u>FIAM TRUST COMPANY</u>			
c EIN-PN <u>20-4659714-078</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>61001357</u>	

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INX TD 2045 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-083	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 41848388
a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INX TD 2010 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-076	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5193557
a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INX TD 2015 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-077	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10058836
a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INX TD 2050 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-084	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 33932159
a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO STBL VAL B1		
b Name of sponsor of entity listed in (a): INVESCO TRUST COMPANY		
c EIN-PN 84-1142974-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 111963373
a Name of MTIA, CCT, PSA, or 103-12 IE: SS US BOND INDEX K		
b Name of sponsor of entity listed in (a): STATE STREET BANK & TRUST COMPANY		
c EIN-PN 90-0337987-462	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 32192046
a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INX TD 2035 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-081	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 57530096
a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INX TD 2065 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-169	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1860959
a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INX TD 2030 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-080	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 98810886
a Name of MTIA, CCT, PSA, or 103-12 IE: LS INVT GRADE BOND D		
b Name of sponsor of entity listed in (a): LOOMIS SAYLES TRUST COMPANY, LLC		
c EIN-PN 84-6391546-004	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 51626735

a Name of MTIA, CCT, PSA, or 103-12 IE: SS GACEQ EX-US IDX K

b Name of sponsor of entity listed in (a): STATE STREET BANK & TRUST COMPANY

c EIN-PN 90-0337987-456	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 35393138
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a Name of MTIA, CCT, PSA, or 103-12 IE: SS RSL SMMDCP IDX K

b Name of sponsor of entity listed in (a): STATE STREET BANK & TRUST COMPANY

c EIN-PN 90-0337987-461	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 135650969
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>		
A Name of plan <u>BROADRIDGE FINANCIAL SOLUTIONS, INC. RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BROADRIDGE FINANCIAL SOLUTIONS, INC.</u>	D Employer Identification Number (EIN) <u>33-1151291</u>	

Part I	Asset and Liability Statement
---------------	--------------------------------------

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	0	22923
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	401889	0
(2) Participant contributions.....	1b(2)	0	0
(3) Other	1b(3)	600963	454039
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2583558	3995946
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	636631	1042028
(B) Common	1c(4)(B)	229337727	272492240
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	18540938	20152843
(9) Value of interest in common/collective trusts.....	1c(9)	1008843936	1201149497
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts.....	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	172580259	195720582
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
(15) Other.....	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	1433525901	1695030098

Liabilities

g Benefit claims payable	1g	147529	9032
h Operating payables	1h	304885	270809
i Acquisition indebtedness.....	1i	0	0
j Other liabilities.....	1j	361770	357265
k Total liabilities (add all amounts in lines 1g through 1j)	1k	814184	637106

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	1432711717	1694392992
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	47509055	
(B) Participants	2a(1)(B)	66271983	
(C) Others (including rollovers).....	2a(1)(C)	25427861	
(2) Noncash contributions.....	2a(2)	0	139208899
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	-28659	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	1053834	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		1025175
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	25099	
(B) Common stock	2b(2)(B)	2607926	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	18502698	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		21135723
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	104557258	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	106802620	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-2245362
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	39861213	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		39861213

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		140932103
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		1865925
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		341783676
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	79422708	
(2) To insurance carriers for the provision of benefits.....	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		79422708
f Corrective distributions (see instructions).....	2f		6985
g Certain deemed distributions of participant loans (see instructions).....	2g		126971
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees.....	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)	0	
(4) Other.....	2i(4)	545737	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		545737
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		80102401
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		261681275
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan.....	2l(2)		0

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: COHNREZNICK

(2) EIN: 22-1478099

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

	Yes	No	Amount
4a	X		135214

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?	X		10205
4l	X		10205
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan BROADRIDGE FINANCIAL SOLUTIONS, INC. RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BROADRIDGE FINANCIAL SOLUTIONS, INC.	D Employer Identification Number (EIN) 33-1151291

Part I	Distributions
---------------	----------------------

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 04-6568107		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
----------------	---

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☐ N/A

Part III	Amendments
-----------------	-------------------

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☐ No
--	-----------------------------------	-----------------------------------	-------------------------------	-----------------------------

Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2021
v. 201209

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year.....

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

- 20 PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation _____

**Broadridge Financial Solutions, Inc.
Retirement Savings Plan**

**Financial Statements
(With Supplementary Information)
and Independent Auditor's Report**

December 31, 2021

Broadridge Financial Solutions, Inc. Retirement Savings Plan

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Independent Auditor's Report

To the Plan Administrator
Broadridge Financial Solutions, Inc. Retirement Savings Plan

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2021 Financial Statements

We have performed an audit of the financial statements of Broadridge Financial Solutions, Inc. Retirement Savings Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C)"). The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements ("2021 Financial Statements").

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2021 Financial Statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2021, stating that the certified investment information, as described in Note 8 to the financial statements, is complete and accurate.

Opinion on the 2021 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the *Auditor's Responsibilities for the Audit of the 2021 Financial Statements* section:

- The amounts and disclosures in the accompanying 2021 Financial Statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying 2021 Financial Statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion on the 2021 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the 2021 Financial Statements* section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the 2021 Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current Plan instrument, including all Plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the 2021 Financial Statements

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2021 Financial Statements* section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a significant likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2021 Financial Statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matters

2021 Supplemental Schedules Required by ERISA

The supplemental Schedule of Delinquent Participant Contributions (Schedule H, Line 4a) and Schedule of Assets (Held at End of Year) (Schedule H, Line 4i) as of or for the year ended December 31, 2021 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Auditor's Report on the 2020 Financial Statements

We were engaged to audit the 2020 financial statements of the Plan. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan administrator instructed us not to perform and we did not perform any auditing procedures with respect to the information certified by a qualified institution. In our report dated October 14, 2021, we indicated that (a) because of the significance of the information that we did not audit, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and (b) the form and content of the information included in the 2020 financial statements other than that derived from the certified information were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.



Parsippany, New Jersey
October 11, 2022

Broadridge Financial Solutions, Inc. Retirement Savings Plan

**Statements of Net Assets Available for Benefits
December 31, 2021 and 2020**

	<u>2021</u>	<u>2020</u>
Assets		
Investments, at fair value	\$1,674,400,293	\$1,413,982,111
Noninterest-bearing cash	22,923	-
Receivables		
Employer contribution	-	401,889
Notes receivable from participants	20,152,843	18,540,938
Other receivables	<u>454,039</u>	<u>600,963</u>
Total receivables	<u>20,606,882</u>	<u>19,543,790</u>
Total assets	<u>1,695,030,098</u>	<u>1,433,525,901</u>
Liabilities		
Other payables	<u>637,106</u>	<u>814,184</u>
Total liabilities	<u>637,106</u>	<u>814,184</u>
Net assets available for benefits	<u><u>\$1,694,392,992</u></u>	<u><u>\$1,432,711,717</u></u>

See Notes to Financial Statements.

Broadridge Financial Solutions, Inc. Retirement Savings Plan

**Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2021**

Additions	
Investment income	
Net appreciation in fair value of investments	\$ 181,548,057
Interest and dividend income	<u>19,972,886</u>
Total investment income	<u>201,520,943</u>
Interest income on notes receivable from participants	<u>1,053,834</u>
Contributions	
Employer	47,509,055
Participants	66,271,983
Rollovers	<u>25,427,861</u>
Total contributions	<u>139,208,899</u>
Total additions	<u>341,783,676</u>
Deductions	
Benefits paid to participants	79,556,664
Administrative expenses	<u>545,737</u>
Total deductions	<u>80,102,401</u>
Increase in net assets	261,681,275
Net assets available for benefits	
Beginning	<u>1,432,711,717</u>
End	<u><u>\$1,694,392,992</u></u>

See Notes to Financial Statements.

Broadridge Financial Solutions, Inc. Retirement Savings Plan

Notes to Financial Statements December 31, 2021

Note 1 - Description of Plan

The following description of the Broadridge Financial Solutions, Inc. Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan, established on March 31, 2007, available to all eligible employees of Broadridge Financial Solutions, Inc. (the "Company"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). The Plan is administered by a three-member committee (the "Administrator") appointed by the Board of Directors of the Company. The Board of Trustees is responsible for oversight of the Plan. The Board of Trustees also determines the appropriateness of the Plan's investment offerings and monitors investment performance.

Contributions

As defined in the Plan document, participating employees who are deemed nonhighly compensated can contribute up to 35% of their compensation, subject to the maximum deferral limits under the Internal Revenue Code (the "IRC"). Participating employees who are highly compensated can only contribute up to the amount determined by the Plan's Administrator annually (currently 15% of their compensation). Participants who have attained age 50 before the close of the Plan year are eligible to make additional contributions ("catch-up contributions") up to the amount of \$6,500 for 2021. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan includes an auto-enrollment provision whereby all newly eligible employees are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate of 3% after 60 days from their date of hire (or date of eligibility) if no elections are made and they do not actively waive enrollment. Contributions are deposited into a FIAM Index Target Date Fund which most closely corresponds with the participants' expected retirement date.

Matching employer contributions

After six months of service, the Company contributes an amount equal to 70% of the first 6% of each participant's salary. Once a participant has contributed to the Plan for 60 months, the Company's matching contribution increases to an amount equal to 80% of the first 6% of a participant's salary. Participants must be actively employed on December 31, or die while in active service, to receive the matching contribution. Participants that terminate during the year and are age 65 or older will receive a prorated matching contribution based on the amounts earned as of their retirement date. Matching contributions are not made on the employee catch-up contributions. Contributions are subject to certain Internal Revenue Service ("IRS") limitations.

Broadridge Financial Solutions, Inc. Retirement Savings Plan

Notes to Financial Statements December 31, 2021

Employer nonelective contributions

After six months of service, the Company also makes a nonelective contribution for the participants whether or not they contribute to the Plan. The contribution amount is based upon the participant's years of service, as shown in the table below:

<u>Years of service as a participant</u>	<u>Percentage of compensation contributed</u>
0 - 4 years	1.00%
5 - 9 years	1.75%
10 - 14 years	2.50%
15 - 19 years	3.25%
20 - 24 years	4.00%
25 - 29 years	4.75%
30 - 34 years	5.50%
35+ years	6.25%

Participants must be actively employed on December 31, or die while in active service, to receive the nonelective contribution. Participants that terminate during the year and are age 65 or older will receive a prorated contribution based on the amounts earned as of their retirement date.

Limitations

In addition, there are contribution limitations set forth in the IRC, which the Plan must satisfy.

Participant accounts

Each participant's account is credited with the participant's contributions and Company matching contributions, as well as allocations of the Company's nonelective contribution and Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are vested immediately in their contributions, including salary deferral and rollover contributions. Vesting in the Company's contribution portion of their accounts is based on years of continuous service. Company contributions are vested as follows:

Less than two years of service from date of hire	0%
Two but less than three years of service from date of hire	50%
Three or more years of service from date of hire	100%

Notes receivable from participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account. The loan interest rate is set at 1% above the prime rate, as defined. Principal and interest is paid ratably through monthly payroll deductions, or at the option of the participant, may be prepaid in total.

Broadridge Financial Solutions, Inc. Retirement Savings Plan

Notes to Financial Statements December 31, 2021

Payment of benefits

In general, participant and employer contributions must remain in the Plan until the later of the attainment of age 65 or the end of employment. The employee may elect to begin taking in-service distributions any time after the attainment of age 70.

On termination of service due to death, disability or retirement, a participant may elect to receive a lump-sum amount equal to the value of the vested portion of his or her account. Alternatively, he or she can elect to defer payment. Vested account balances of former employees between \$1,000 and \$5,000 will be automatically rolled over into an IRA. Vested account balances of former employees less than \$1,000 will automatically be distributed to the participant in a lump-sum payment.

Forfeited accounts

At December 31, 2021 and 2020, forfeited nonvested accounts totaled \$179,564 and \$37,407, respectively. These accounts will be used to reduce future employer contributions and plan administrative and recordkeeping fees. During 2021, employer contributions and plan administrative and recordkeeping fees were reduced by \$1,638,174 and \$453,415, respectively, from forfeited nonvested accounts.

Note 2 - Summary of accounting policies

Basis of accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Investment valuation and income recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Board of Trustees determines the Plan's valuation policies utilizing information provided by the investment advisers and Fidelity Management Trust Company (the "Trustee"). See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2021 or 2020.

Payment of benefits

Benefits are recorded when paid.

Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation in fair value of investments.

Broadridge Financial Solutions, Inc. Retirement Savings Plan

Notes to Financial Statements December 31, 2021

Use of estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Subsequent events

The Plan has evaluated subsequent events through October 11, 2022, the date the financial statements were available to be issued.

Note 3 - Fair value measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities ("Level 1") and the lowest priority to unobservable inputs ("Level 3"). The three levels of the fair value hierarchy under Financial Accounting Standards Board Accounting Standards Codification ("ASC") 820 are described as follows:

Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets and liabilities in active markets that the Plan has the ability to access.

Level 2: Inputs to valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability; and
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset and liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2021 and 2020.

Mutual funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Broadridge Financial Solutions, Inc. Retirement Savings Plan

Notes to Financial Statements December 31, 2021

Common/collective trusts: Valued at the NAV of units of a bank collective trust. The NAV, as provided by the Trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

Interest-bearing cash: Valued at amortized cash, which approximates fair value.

Common and Preferred stock: Valued at the closing price reported on an active exchange.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2021 and 2020. Classification within the fair value hierarchy table is based on the lowest level of any input that is significant to the fair value measurement:

Assets at fair value as of December 31, 2021				
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 195,720,582	\$ -	\$ -	\$ 195,720,582
Interest-bearing cash	-	3,995,946	-	3,995,946
Common stock	272,492,240	-	-	272,492,240
Preferred stock	1,042,028	-	-	1,042,028
Total assets in the fair value hierarchy	469,254,850	3,995,946	-	473,250,796
Investments measured at net asset value (a)	-	-	-	1,201,149,497
Total investments at fair value	\$ 469,254,850	\$ 3,995,946	\$ -	\$1,674,400,293

Assets at fair value as of December 31, 2020				
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 172,580,259	\$ -	\$ -	\$ 172,580,259
Interest-bearing cash	-	2,583,558	-	2,583,558
Common stock	229,337,727	-	-	229,337,727
Preferred stock	636,631	-	-	636,631
Total assets in the fair value hierarchy	402,554,617	2,583,558	-	405,138,175
Investments measured at net asset value (a)	-	-	-	1,008,843,936
Total investments at fair value	\$ 402,554,617	\$ 2,583,558	\$ -	\$1,413,982,111

(a) In accordance with ASC Subtopic 820-10, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair

Broadridge Financial Solutions, Inc. Retirement Savings Plan

Notes to Financial Statements December 31, 2021

value hierarchy to the line items presented in the statements of net assets available for benefits.

For the year ended December 31, 2021, there were no significant transfers between Levels 1 and 2 and no transfers in or out of Level 3.

Note 4 - Net asset value per share

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2021 and 2020. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan:

	2021 fair value	2020 fair value	Redemption frequency (if currently eligible)	Notice period
Invesco Stable Asset Fund	\$ 111,963,373	\$ 112,826,725	Daily	1 Year
SSgA U.S. Bond Index Fund NLS C	32,192,046	42,238,529	Daily	1 Day
SSgA Global Equity ex U.S. Index Fund NLS C	35,393,138	30,843,481	Daily	1 Day
SSgA S&P 500 Index Fund NLS N	328,286,444	244,692,330	Daily	1 Day
SSgA Russell Small/Mid Cap Index Fund NLS	135,650,969	113,708,372	Daily	1 Day
Loomis Sayles Investment Grade Bond Trust	51,626,735	58,549,510	Daily	1 Day
FIAM Index Target Income Fund	10,724,264	9,634,976	Daily	1 Day
FIAM Index Target 2010 Fund	5,193,559	4,660,622	Daily	1 Day
FIAM Index Target 2015 Fund	10,058,837	9,602,656	Daily	1 Day
FIAM Index Target 2020 Fund	61,001,357	59,888,725	Daily	1 Day
FIAM Index Target 2025 Fund	61,261,477	49,104,910	Daily	1 Day
FIAM Index Target 2030 Fund	98,810,886	83,163,082	Daily	1 Day
FIAM Index Target 2035 Fund	57,530,096	43,796,429	Daily	1 Day
FIAM Index Target 2040 Fund	92,302,666	69,894,411	Daily	1 Day
FIAM Index Target 2045 Fund	41,848,388	29,403,366	Daily	1 Day
FIAM Index Target 2050 Fund	33,932,159	25,019,521	Daily	1 Day
FIAM Index Target 2055 Fund	21,877,838	15,229,219	Daily	1 Day
FIAM Index Target 2060 Fund	9,634,307	6,179,673	Daily	1 Day
FIAM Index Target 2065 Fund	1,860,958	407,399	Daily	1 Day
Total	<u>\$1,201,149,497</u>	<u>\$1,008,843,936</u>		

There were no unfunded commitments as of December 31, 2021 and 2020.

Note 5 - Related-party transactions and party in interest transactions

Certain Plan investments are managed by Fidelity Institutional Asset Management Trust Company, an affiliate of the Trustee, and therefore, these transactions qualify as party in interest transactions.

Note 6 - Plan termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in employer contributions.

Broadridge Financial Solutions, Inc. Retirement Savings Plan

Notes to Financial Statements December 31, 2021

Note 7 - Tax status

The IRS has determined and informed the Company by letter, dated September 11, 2012, that the Plan is designed in accordance with applicable sections of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan Administrator believes that the Plan is designed and is currently being operated, in compliance with applicable requirements of the IRC and, therefore, believes that the Plan is qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 8 - Certified investments

The Plan Administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Investments and notes receivable from participants held at December 31, 2021 and 2020, and investment income and interest income on notes receivable from participants for the year ended December 31, 2021, that is disclosed in the accompanying financial statements and supplemental schedule, was obtained or derived from information supplied to the Plan Administrator and certified as complete and accurate by the Trustee of the Plan.

Note 9 - Risks and uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

In early 2020, an outbreak of a novel strain of coronavirus ("COVID-19") emerged globally. As a result, events have occurred domestically in the United States and globally, including mandates from federal, state and local authorities, leading to an overall decline in economic activity. The continuation of the effects of COVID-19 could result in significant disruption of global financial markets; however, the ultimate impact of COVID-19 on the financial performance of the Plan's investments cannot be reasonably estimated at this time.

Note 10 - Nonexempt transactions

As reported on the supplemental Schedule of Delinquent Participant Contributions (Schedule H, Line 4a), during 2021 certain Plan contributions were not remitted to the trust within the time frame specified by the Department of Labor's Regulation 29 (CFR 2510.3-102), thus constituting nonexempt transactions between the Plan and the Company for the year ended December 31, 2021.

Supplementary Information

Broadridge Financial Solutions, Inc. Retirement Savings Plan
E.I. #33-1151291
Plan #001

Schedule of Delinquent Participant Contributions (Schedule H, Line 4a)
Year Ended December 31, 2021

Participant contributions transferred late to the Plan	Check here if late participant loan repayments are included	Total that constitutes nonexempt prohibited transactions			Total fully corrected under VFCP and Prohibited Transaction Exemption 2002-51
		Contributions not corrected	Contributions corrected outside Voluntary Fiduciary Correction Program	Contributions pending correction in VFCP	
<u>\$ 135,214</u>		<u>\$ 135,214</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

See Independent Auditor's Report.

Broadridge Financial Solutions, Inc. Retirement Savings Plan
E.I. #33-1151291
Plan #001

Schedule of Assets (Held at End of Year) (Schedule H, Line 4i)
December 31, 2021

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description	(d) Cost (A)	(e) Current value
	Invesco Stable Asset Fund	Common/collective trust	(A)	\$ 111,963,373
	SSgA S&P 500 Index Fund NLS N	Common/collective trust	(A)	328,286,444
	SSgA Global Equity ex U.S. Index Fund NLS	Common/collective trust	(A)	35,393,138
	SSgA U.S. Bond Index Fund NLS C	Common/collective trust	(A)	32,192,046
	SSgA Russell Small/Mid Cap Index Fund NLS	Common/collective trust	(A)	135,650,969
	Loomis Sayles Investment Grade Bond Trust	Common/collective trust	(A)	51,626,735
*	FIAM Index Target Income Fund	Common/collective trust	(A)	10,724,264
*	FIAM Index Target 2010 Fund	Common/collective trust	(A)	5,193,559
*	FIAM Index Target 2015 Fund	Common/collective trust	(A)	10,058,837
*	FIAM Index Target 2020 Fund	Common/collective trust	(A)	61,001,357
*	FIAM Index Target 2025 Fund	Common/collective trust	(A)	61,261,477
*	FIAM Index Target 2030 Fund	Common/collective trust	(A)	98,810,886
*	FIAM Index Target 2035 Fund	Common/collective trust	(A)	57,530,096
*	FIAM Index Target 2040 Fund	Common/collective trust	(A)	92,302,666
*	FIAM Index Target 2045 Fund	Common/collective trust	(A)	41,848,388
*	FIAM Index Target 2050 Fund	Common/collective trust	(A)	33,932,159
*	FIAM Index Target 2055 Fund	Common/collective trust	(A)	21,877,838
*	FIAM Index Target 2060 Fund	Common/collective trust	(A)	9,634,307
*	FIAM Index Target 2065 Fund	Common/collective trust	(A)	1,860,958
	PIMCO Inflation Multi-Asset Fund INSTL	Mutual fund	(A)	7,704,634
	American Funds EuroPacific Growth Fund	Mutual fund	(A)	94,474,227
	Eaton Vance Atlanta Capital Vanguard Federal Money Market Fund	Mutual fund	(A)	93,362,162
	T. Rowe Price Equity Income Trust:		(A)	179,559
	SSBK Govt Stif Fund	Interest-bearing cash	\$ 1,900,109	1,877,186
	Volkswag PFD Perp	Preferred stock	925,000	1,042,028
	Abbvie Inc.	Common stock	1,236,626	1,940,282
	Akzo Nobel Nv	Common stock	354,335	377,827
	Altria Group Inc.	Common stock	254,603	275,336
	Ameren Corp	Common stock	536,185	636,689
	American International Group	Common stock	1,950,158	2,461,981
	Anthem Inc.	Common stock	1,535,272	2,371,007
	Applied Materials Inc.	Common stock	400,465	1,119,144
	Astrazeneca Plc Spons Adr	Common stock	370,569	412,352
	AT&T Inc.	Common stock	383,170	295,889
	Bank of America Corporation	Common stock	376,821	565,290
	Bank of New York Mellon Corp	Common stock	124,101	157,687
	Becton Dickinson & Co	Common stock	1,570,464	1,575,522
	Becton Dickinson and Co 6.5% Pc 06	Common stock	335,404	348,218
	Biogen Inc.	Common stock	261,922	230,323
	Boeing Co	Common stock	1,299,825	894,062
	Cardinal Health Inc.	Common stock	483,947	458,055
	Centene Corp	Common stock	529,222	640,660
	Cf Industries Holdings Inc.	Common stock	998,031	1,805,244
	Chevron Corp	Common stock	183,352	199,495

Broadridge Financial Solutions, Inc. Retirement Savings Plan
E.I. #33-1151291
Plan #001

Schedule of Assets (Held at End of Year) (Schedule H, Line 4i)
December 31, 2021

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description	(d) Cost (A)	(e) Current value
	Chubb Ltd	Common stock	1,533,807	1,970,216
	Cigna Corp	Common stock	1,000,215	1,019,328
	Cisco Systems Inc.	Common stock	442,327	651,824
	Citigroup Inc.	Common stock	337,745	320,067
	Citizens Financial Group Inc.	Common stock	174,463	184,275
	Citrix Systems Inc.	Common stock	1,017,206	768,733
	Coca Cola Co	Common stock	450,384	552,548
	Comcast Corp Cl A	Common stock	1,334,630	1,519,412
	Conagra Brands Inc.	Common stock	937,896	1,088,053
	Cvs Health Corp	Common stock	1,042,855	1,399,159
	Disney (Walt) Co	Common stock	1,019,841	1,104,830
	Dominion Energy Inc.	Common stock	933,426	974,301
	Dupont De Nemours Inc.	Common stock	188,501	268,270
	Entergy Corp	Common stock	241,300	299,536
	Eog Resources Inc.	Common stock	603,422	1,137,379
	Equitable Holdings Inc.	Common stock	890,840	1,203,721
	Equity Residential Reit	Common stock	1,312,020	1,594,520
	Exxon Mobil Corp	Common stock	910,941	825,943
	Fifth Third Bancorp	Common stock	1,162,689	1,728,456
	Fiserv Inc.	Common stock	421,104	407,376
	Flowserve Corp	Common stock	88,360	75,857
	Fox Corporation B	Common stock	594,361	590,815
	Franklin Resources Inc.	Common stock	122,415	152,045
	General Electric Co	Common stock	2,269,014	2,557,303
	Gilead Sciences Inc.	Common stock	178,524	196,047
	Glaxosmithkline Plc	Common stock	127,250	124,975
	Goldman Sachs Group Inc.	Common stock	925,002	1,204,650
	Halliburton Co	Common stock	44,743	109,776
	Hartford Finl Svcs Group Inc.	Common stock	425,898	448,760
	Hess Corp	Common stock	47,904	66,627
	Huntington Bancshares Inc.	Common stock	989,274	1,048,791
	International Flavors & Fragra	Common stock	654,435	1,103,813
	International Paper Co	Common stock	1,379,153	1,539,441
	Johnson & Johnson	Common stock	997,118	1,224,006
	Jpmorgan Chase & Co	Common stock	514,336	616,140
	Kimberly Clark Corp	Common stock	1,441,289	1,532,817
	Kohls Corp	Common stock	449,379	607,497
	Las Vegas Sands Corp	Common stock	1,042,934	665,550
	Loews Corp	Common stock	1,257,209	1,643,330
	L3Harris Technologies Inc.	Common stock	1,244,684	1,388,192
	Marsh & McLennan Cos Inc.	Common stock	120,236	188,247
	Mattel Inc.	Common stock	364,436	666,139
	Medtronic Plc	Common stock	1,361,082	1,256,607
	Merck & Co Inc. New	Common stock	739,385	736,587
	Metlife Inc.	Common stock	1,314,130	1,795,213
	Microsoft Corp	Common stock	765,923	1,662,766
	Mondelez Intl Inc.	Common stock	58,173	72,941
	Morgan Stanley	Common stock	512,513	1,037,159
	News Corp New Cl A	Common stock	644,564	1,085,181
	Nextera Energy	Common stock	367,857	586,394
	Nextera Energy Inc. 5.279% Pc 03/01/23	Common stock	288,505	338,650
	Nielsen Holdings Plc	Common stock	505,949	524,584
	Nisource Inc.	Common stock	1,061,300	1,148,328

Broadridge Financial Solutions, Inc. Retirement Savings Plan
E.I. #33-1151291
Plan #001

Schedule of Assets (Held at End of Year) (Schedule H, Line 4i)
December 31, 2021

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description	(d) Cost (A)	(e) Current value
	Nisource Inc. 7.75% Pc 03/01/2024	Common stock	283,035	314,523
	Nxp Semiconductors Nv	Common stock	229,761	438,021
	Occidental Petroleum Corp	Common stock	246,834	190,522
	Organon & Co	Common stock	15,170	12,789
	Paccar Inc.	Common stock	410,640	459,482
	Pfizer Inc.	Common stock	816,949	1,313,922
	Philip Morris Intl Inc.	Common stock	1,065,368	1,214,480
	Pnc Financial Services Grp Inc.	Common stock	236,054	351,512
	Qualcomm Inc.	Common stock	1,475,952	3,092,880
	Raymond James Financial Inc.	Common stock	110,414	193,069
	Rayonier Inc. Reit	Common stock	593,163	810,267
	Rpm International Inc.	Common stock	93,976	111,100
	Sanofi	Common stock	580,564	590,164
	Sanofi Spon Adr	Common stock	279,504	288,175
	Schwab Charles Corp	Common stock	312,217	593,578
	Sempra Energy	Common stock	1,708,525	1,643,447
	Siemens Ag (Regd)	Common stock	741,863	790,735
	Snap-On Incorporated	Common stock	156,038	225,072
	Southern Co	Common stock	2,289,383	2,569,761
	Southern Company Pc 6.75% 08/01/2022	Common stock	411,649	420,812
	Southwest Airlines Co	Common stock	342,231	260,981
	State Street Corp	Common stock	1,104,927	1,236,249
	Stericycle Inc.	Common stock	900,923	831,739
	Sylvamo Corp	Common stock	1,678	1,924
	Targa Resources Corp	Common stock	38,696	115,085
	Tc Energy Corp	Common stock	672,391	636,760
	Te Connectivity Ltd	Common stock	184,647	332,844
	Texas Instruments Inc.	Common stock	724,755	1,082,760
	Tjx Companies Inc. New	Common stock	586,048	709,245
	Totalenergies Se	Common stock	1,890,819	1,878,238
	Totalenergies Se Adr	Common stock	430,779	485,499
	Tyson Foods Inc. Cl A	Common stock	1,910,630	1,938,090
	United Parcel Service Inc. Cl B	Common stock	1,552,429	2,622,879
	Unitedhealth Group Inc.	Common stock	404,836	506,157
	Verizon Communications Inc.	Common stock	150,260	130,212
	Vornado Realty Trust	Common stock	117,132	110,217
	Walmart Inc.	Common stock	338,791	395,438
	Wells Fargo & Co	Common stock	4,176,696	3,972,648
	Welltower Inc.	Common stock	253,121	347,454
	Weyerhaeuser Co	Common stock	1,197,194	1,785,647
	Xcel Energy Inc.	Common stock	180,392	182,790
	Zimmer Biomet Hldgs Inc.	Common stock	697,749	633,548
	3M Co	Common stock	220,787	204,452
	Jennison Income Trust Equity Fund:			
	SSBK Govt Stif Fund	Interest-bearing cash	2,118,759	2,118,760
	Adobe Inc.	Common stock	3,490,591	5,470,995
	Adyen Bv	Common stock	1,314,376	3,486,927
	Airbnb Inc. Class A	Common stock	4,865,166	4,926,439
	Align Technology Inc.	Common stock	2,574,688	2,401,993
	Alphabet Inc. Cl A	Common stock	3,178,520	5,515,964
	Alphabet Inc. Cl C	Common stock	3,180,096	5,500,715
	Amazon.com Inc.	Common stock	7,449,743	11,436,786

Broadridge Financial Solutions, Inc. Retirement Savings Plan
E.I. #33-1151291
Plan #001

Schedule of Assets (Held at End of Year) (Schedule H, Line 4i)
December 31, 2021

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description	(d) Cost (A)	(e) Current value
	Apple Inc.	Common stock	4,236,186	10,366,004
	Atlassian Corp Plc Cls A	Common stock	1,480,122	3,614,629
	Biontech Se Adr	Common stock	1,422,542	1,318,389
	Block Inc. Cl A	Common stock	3,211,819	2,190,399
	Chipotle Mexican Grill Inc.	Common stock	930,167	1,802,446
	CrowdStrike Holdings Inc.	Common stock	1,382,422	2,340,293
	Danaher Corp	Common stock	2,101,298	2,918,319
	Dexcom Inc.	Common stock	533,597	1,163,571
	Estee Lauder Cos Inc. Cl A	Common stock	2,717,113	4,316,532
	Hubspot Inc.	Common stock	1,203,276	1,204,926
	Kering	Common stock	2,432,079	2,905,348
	Kkr & Co Inc.	Common stock	854,930	869,937
	Lilly (Eli) & Co	Common stock	2,052,951	2,433,498
	Lululemon Athletica Inc.	Common stock	1,462,257	2,023,014
	Lvmh Moet Hennessy Louis Vuitton Se	Common stock	3,623,315	4,937,168
	Mastercard Inc. Cl A	Common stock	2,175,778	2,552,969
	Match Group Inc.	Common stock	1,936,696	2,295,992
	Mercadolibre Inc.	Common stock	2,433,549	2,049,568
	Meta Platforms Inc. Cl A	Common stock	2,548,916	3,582,464
	Microsoft Corp	Common stock	5,585,288	9,912,696
	Netflix Inc.	Common stock	2,589,544	4,145,992
	Nike Inc. Cl B	Common stock	1,972,861	2,889,558
	Nvidia Corp	Common stock	2,912,102	10,137,678
	Okta Inc. Cl A	Common stock	1,832,416	1,564,931
	Paypal Hldgs Inc.	Common stock	1,400,107	2,055,333
	Roblox Corp	Common stock	1,416,591	1,778,478
	Salesforce.Com Inc.	Common stock	4,805,046	4,948,419
	Sea Ltd Adr	Common stock	1,812,692	1,157,252
	Shopify Inc. Cl A	Common stock	3,698,767	7,742,309
	Snap Inc. - A	Common stock	2,969,671	2,360,295
	Snowflake Inc. Cl A	Common stock	2,079,705	2,111,090
	Spotify Technology Sa	Common stock	1,280,534	1,087,771
	Tesla Inc.	Common stock	2,804,533	15,063,342
	Tjx Companies Inc. New	Common stock	1,275,503	1,353,881
	Trade Desk Inc.	Common stock	485,205	1,443,238
	Twilio Inc. Class A	Common stock	1,246,185	1,403,602
	Uber Technologies Inc.	Common stock	2,809,363	2,893,128
	Visa Inc. Cl A	Common stock	3,297,861	3,549,493
	Workday Inc. Cl A	Common stock	1,451,369	1,465,064
			199,633,793	1,674,400,293
*	Participant loans	Interest ranging from 4.25% to 6.50%, with various maturity dates, secured by the participant's account balance.	-	20,152,843
	Total		<u>\$ 199,633,793</u>	<u>\$ 1,694,553,136</u>

* Party-in-interest.

(A) Cost not required

See Independent Auditor's Report.



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